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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	31849.38
First Inventor	Wade P. Farrow, et al.
Title	PROGRAMMABLE SURGICAL INSTRUMENT SYSTEM
Express Mail Label No.	EV333435272

(Only for i	new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EV	333435272						
See MPEP (APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Col	II Stop Patent Application mmissioner for Patents D. Box 1450 exandria VA 22313-1450						
(Submi 2. Applic See 3 3. Specif (prefer - Desci - Cross - State - Refer or a c - Back - Brief - Brief - Detail - Claim	ransmittal Form (e.g., PTO/SB/17) it an original and a duplicate for fee processing) ant claims small entity status. 7 CFR 1.27. fication [Total Pages15] red arrangement set forth below) riptive title of the invention s Reference to Related Applications ment Regarding Fed sponsored R & D rence to sequence listing, a table, computer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) led Description (s) act of the Disclosure	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS							
5. Oath or Dec	· · · · · · · · · · · · · · · · · · ·	10. 37 CFR 3.73(b) Si (when there is an							
a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76		12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: Check (\$982).							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:									
Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an eath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
	19. CORRESPON	DENCE ADDRESS							
Custon	ner Number: 27683	OR 🗆	Correspondence address below						
Name J. Andrew Lowes									
Address	Haynes and Boone, LLP 901 Main Street, Suite 3100								
City	Dallas	State TX	Zip Code 75202-3789						
Country	USA To	elephone 972-651-7557	Fax 972-692-9057						
Name (Print/Type) Julie M. Nickols Registration No. (Attorney/Agent) 50,826									
Signature	July M. Nichols		Date Oct. 3/ 2003						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Wade P. Farrow, et al.

Serial No. Unknown

Serial No. Unknown

Filed: Herewith

For: PROGRAMMABLE SURGICAL
INSTRUMENT SYSTEM

Group Art Unit:

Examiner:

Examiner:

EXPRESS MAIL CERTIFICATE

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Express Mail Number: EV333435272

Date of Deposit: October 31, 2003

I hereby certify that the following attached papers and fee:

- 1. Utility Patent Application Transmittal;
- 2. Fee Transmittal (in duplicate);
- 3. Application Data Sheet;
- 4. Patent Application consisting of 9 pages of specification, 5 pages of claims and 1 page Abstract of Disclosure;
- 5. Three (3) drawing sheets;
- 6. Unexecuted Declaration;
- 7. Unexecuted Assignment;
- 8. Check in the amount of \$982.00;
- 9. Return Postcard

are being deposited with United States Postal Service "Express Mail Post Office to Addressee" to the Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or Frinted Name

Signature

PTO/SB/17 (10-03)
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FEE TRANSMITTAL			Complete if Known						
			Application Number						
			Filing Date						
for FY 2004			First Named Inventor Wade			P. Farrow, et al.			
Effective 10/01/2003. Patent fees are subject to annual revision.			Examiner Name						
Applicant claims small entity status. S	· · · · · · · · · · · · · · · · · · ·		Art Unit						
TOTAL AMOUNT OF PAYMENT	(\$) 982.00		Attorney Docket No. 31849.38				<u></u>		
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)						
Check Credit card Money Order None			3. ADDITIONAL FEES Large Entity Small Entity						
Deposit Account:			Fee	-	Fee	Foo	Description	n	
Deposit Account 08-1394		ł	(\$)	Code	• •		•	1	Fee Paid
Number Deposit	_	1051		2051		-	te filing fee or te provisional		
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The Director is authorized to: (check all that ap	oply)	1053		1053		Non-English s	•	eta saavamination	
Charge fee(s) indicated below Cred	it any overpayments		2,520		•		· · · · · · · · · · · · · · · · · · ·	rte reexamination	
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FEE CALCULATION		1251	110	2251			reply within fir		
1. BASIC FILING FEE		1252		2252	210	Extension for	reply within se	cond month	
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Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid	1254	1,480	2254			reply within fo		
1001 770 2001 385 Utility filing fee	770.00	1255	2,010	2255	1,005	Extension for	reply within fif	th month	
1002 340 2002 170 Design filing fee	770.00	1401	330	2401	165	Notice of App	eal		
1003 530 2003 265 Plant filing fee		1402	330	2402	165	Filing a brief in	n support of a	n appeal	
1004 770 2004 385 Reissue filing fe	•	1403	290	2403	145	Request for or	ral hearing		
1005 160 2005 80 Provisional filing	fee	1451	1,510	1451	1,510	Petition to inst	titute a public i	use proceeding	
SUBTOTAL (1)	(\$) 770.00	1452	110	2452	55	Petition to revi	ive - unavoida	ble	
		1453	1,330	2453	665	Petition to rev	rive - unintenti	onal	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1501	1,330	2501	665	Utility issue fe	e (or reissue)	4	
Extra Claims	below Fee Paid	1502	480	2502	240	Design issue	fee		
Total Claims 27 -20** = 7 x 18 = 126.00 Independent 4 - 3** = 1 x 86 = 86.00		1503	640	2503		Plant issue fe			
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Large Entity Small Entity Fee Fee Fee Fee Description	tion	1806	180	1806				isclosure Stmt	<u> </u>
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1202 18 2202 9 Claims in excess 1201 86 2201 43 Independent claims	is of 20 ims in excess of 3	1809	770	2809	385		ission after fina		
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· · · · · · · · · · · · · · · · · · ·			Other fee (specify)						
SUBTOTAL (2) (\$) 212.00 **or number previously paid, if greater; For Reissues, see above			*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						
SUBMITTED BY (Complete (if applicable))									
Name (Print/Type) Julie M. Nickols			Registra (Attomev/		50,8	326	Telephone	972-239-8640	
Signature July My Michael			. MYCHOY/	MOUNT	-		Date	Oct. 31 70	3.3
									

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